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ABSTRACT

The public perception of psychology, psychologists, and psychiatrists has not been examined for 20 years. Participants for this study were randomly selected from an urban area (Oklahoma City) and a rural area (Okarche, Oklahoma). Questionnaires about the usefulness and competency of these professionals were administered by telephone; half of the questionnaires used the term psychologist (N=225) and the other half substituted the word psychiatrist (N=225). Additionally, urban psychologists (N=47) and psychiatrists (N=25) responded to the questionnaire as if they were members of the public. Survey results showed that urban residents recognized the need for psychologists and psychiatrists. Psychiatrists were favored for intelligence testing, career counseling, sexual dysfunction, and alcohol and drug abuse while psychologists were favored for stress management. The findings indicated that the perception of psychologists' competence had improved since a 1965 study but confusion about professional domain continued. Rural residents also recognized the need for psychiatrists and psychologists but they desired less information than urban residents about a potential therapist. The psychologists and psychiatrists who responded to the questionnaire reported that the public had a higher perception of their abilities to solve problems than the public reported. (ABL)

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SURVEY OF THE PUBLIC PERCEPTION OF PSYCHOLOGY, PSYCHOLOGISTS, AND PSYCHIATRISTS

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Survey of the Public Perception of Psychology, Psychologists, and Psychiatrists

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Abstract

A scientific telephone survey of Oklahoma City (pop. 800,000), Clinton (pop. 10,000) and Okarche (pop. 1,000), Oklahoma residents was conducted to assess the current public perception of Psychiatrists and Psychologists in urban and rural areas. In addition, Psychologist (n=47) and Psychiatrists (n=25) were asked to complete the same 15 question survey 'as if' they were the average Oklahoma City resident to determine their knowledge of the market they serve. In Oklahoma City (n=400), Clinton (n=100) and Okarche (n=50) a nearly representative sample of residents (49% male, 51% female; 85% white, 15% nonwhite) were divided into two groups with one group responding to questions about Psychologists (n=225) and the other group (n=225) was administered the same questions with the word Psychiatrist substituted for Psychologist. Findings indicate that the perceived competency of Psychologists appears to have increased since earlier surveys. Confusion about professional demains still exists since Psychiatrists were rated as more competent in intelligence testing. Clinton and Okarche respondents rated both the unique skills of Psychologists and Psychiatrists and the need for their services slightly higher than the urban sample. In addition, small town residents generally perceived Psychologists and Psychiatrists as less competent in 10 specific areas, than urban residents. Both Psychologists and Psychiatrists over-estimated their status relative to four other professions. Finally, Psychologists more accurately predicted public perception of their competency in specific areas when compared to Psychiatrists' predictions.

Table 1

Mean Competency Ratings of Psychologists and Psychiatrists by Oklahoma City Respondents

Competency Areas	Psychologists M	Psychiatrists M	p
Depression	1.70	1.70	
Marital Problems	2.03	1.87	
Sexual Dysfunctions	2.30	1.90	.001
Alcohol/Drug Abuse	2.20	1.98	.03
Psychotic Disorders	2.13	2.02	
Career Counseling	2.83	2.49	.002
Phobias	2.10	1.96	
Intelligence Testing	2.04	1.82	.04
Personality Testing	1.97	1.72	.01
Stress	2.12	2.31	.04

Table 2

Summary of Multivariate and Univariate Significance Tests for Main Effects of Competency Estimates by Population Density and Profession

Multivariate Analysis of Variance

	Wilks Lambda	p
Population Density	.826	<.001
Psychologist/Psychiatrist	.970	.149
Population x Professional Interaction	.938	.062

Univariate Analysis of Variance Across Three Population Levels

Competency Areas	F	p	Competency Areas	F	p
Depression	6.41	.002	Career Counseling	8.52	.000
Marital Problems	25.37	.000	Phobias	.35	
Sexual Dysfunctions	14.89	.000	Intelligence Testing	14.23	.000
Alcohol/Drug Abuse	2.90		Personality Testing	16.74	.000
Psychotic Disorders	.51		Stress	1.03	

Table 3

Mean Competency Ratings of Psychologists' and Psychiatrists' Prediction of Actual Urban Respondent Ratings

Competency Areas	Psychologists			Psychiatrists		
	Actual M	Predicted M	p	Actual M	Predicted M	p
Depression	1.70	1.69		1.70	2.23	
Marital Problems	2.03	2.03		1.87	2.73	.000
Sexual Dysfunctions	2.29	2.68		1.90	2.71	.001
Alcohol/Drug Abuse	2.20	2.43		1.98	2.57	.009
Psychotic Disorders	2.13	2.73	.003	2.02	2.24	
Career Counseling	2.83	2.51		2.49	3.38	.000
Phobias	2.10	1.76		1.96	2.55	
Intelligence Testing	2.04	1.53	.012	1.82	3.38	.000
Personality Testing	1.97	1.61		1.72	3.33	.000
Stress	2.12	2.00		2.31	2.45	

I. Survey of the Public Perception of Psychology, Psychologists, and Psychiatrists

Twenty years has passed since a major scientific survey of the public perception of Psychology, Psychologists, and Psychiatrists has been conducted. Psychologists in particular have neglected this necessary profesional responsibility. Our survey was developed by many professionals, including APA officers and staff, to insure obtaining relevant and reliable information. Questions from two other comparable surveys conducted in 1965 and 1946 were included to assess possible changes in public opinion over the last 39 years.

The survey respondents were randomly selected from Oklahoma City (pop. 800,000) and Okarche, Oklahoma (pop. 1,000). Oklahoma City was selected as the major city surveyed, in part, due to its ranking as the 35th largest statistical metropolitan surrounding area in the United States. This centrally located Mid-American city borders on the South, the Midwest and the West. Okarche was choosen for its size and lack of proxmitiy to any other large city. Half of the sample (n=225) responded to a quesionnaire administered by telephone concerning Psychologists, and the other half (n=225) answered the same questions with the word Psychiatrist substituted for Psychologist.

Including an urban and rural area allowed us to study differences in perception that urban and rural residents may have of Psychologists and Psychiatrists. In addition, 47 Psychologists and 25 Psychiatrists in Oklahoma City completed

the same survey. They were instructed to respond 'as if' they were the average Oklahoma City resident in order to assess their knowledge of the public's perception of their professions and the services they deliver.

Past survey findings indicate that Psychologists ranked low in the profesional heirarchy behind Surgeon, Engineer, Lawyer, Psychiatrist, and Dentist. In the 1965, St. Louis, Missouri survey, Thumin and Zebelman concluded that "...the public does appear to be much better informed today than in 1946 about what Psychologists do and how they differ from Psychiatrists." In 1946, Guest found that 'people make little or no distinction between psychologist and Psychiatrists."

The results from our survey will be presented as follows: 1) Debra Moser will present "Urban Perception of Psychology and Psychiatry"; 2) Stephanie Winkler Bouc will present "Rural Perception of Psychologists and Psychiatrists"; and 3) Leslie Bell will present "Psychologists' and Psychiatrists' Knowledge of the Public Perception of Psychology and Psychiatry."

II. Urban Perception of Psychology and Psychiatry

The results of comparing 200 respondents' perception of Psychologists with 200 respondents' perception of Psychiatrists revealed several notable differences. The differences to be discussed include the areas of need for services, competency rating, referral sources, and status ratings.

The majority of urban respondents acknowledged a genuine need for both psychological and psychiatric services (82% and 65%, respectively), and slightly but significantly more endorsed the need for psychological services. Nearly twice as many urban residents perceived Psychologists as "...having ways of solving problems that friends or relatives do not" when compared to Psychiatrists, 61% and 32%, respectively.

Our findings indicate that Psychologists and Psychiatrists are both seen as competent when rated by respondents on ten (10) specific areas of depression, personality testing, etc. (overall Psychiatrist $\bar{x}$ = 1.98, Psychologist $\bar{x}$ = 2.10.) The lowest mean rating for either group was a 2.8 on a one to five rating scale where one represents the most competent. There are some specific differences which emerged between professional groups. Four of the five significant differences favored Psychiatrists and they are as follows: intelligence testing, career counseling, sexual dysfunction, and alcohol and drug abuse. Psychologists only rate significantly higher on stress management.

When respondents were asked in a paired comparison format what source they would most likely use to find psychological or psychiatric help they prefered their family doctor to, and then, relatives, pastor, friend, and the yellowpages. When analyzed separately by professional group, pastor ranks higher then relative when seeking a source for a Psychologist. This finding was consistent with rural repondent preferences.

In an attempt to assess the desirability of psychology as a profession, respondents were asked which career they would prefer for themselves and then asked again which career they would prefer for their son or daughter. Psychologist was ranked fourth ahead of Dentist and Psychiatrist when respondents chose a career for themselves. When choosing a career for their son or daughter, Psychologist edged out Psychiatrist for fifth and six, and followed, in order, Family Doctor, Lawyer, Engineer and Dentist.

In conclusion, the perceived competency of Psychologists appears to have increased since the Thumin and Zebelman St. Louis survey of 1965, respondents more often chose to visit a Psychiatrist for depression, severe mental disorders and drinking problems. Of those areas, todays Psychiatrists are perceived as more competent only in the areas of alcohol and drug abuse. Psychiatrists are also viewed as more competent in dealing with sexual dysfunctions. Unfortunately, confusion about professional domains continues to exist since

Psychiatrists are rated as more competent in intelligence testing. It appears that 1) the perceived need for psychological services, 2) the overall abilities of Psychologists to solve problems, and 3) Psychologists relative professional status has improved since past surveys were completed.

III. Rural Perception of Psychologists and Psychiatrists

The Southwestern community, Okarche, Oklahoma (population, 1,000) was chosen as a rural site due to its size and lack of proximity to an urban area and size. Fifty (50) Okarche residents survey responses were compared to four hundred (400) Oklahoma City respondents (population 800,000) to determine if urban and rural differences exist in the perception of Psychologists and Psychiatrists. Differences were found in 1) the need for and expected helpfulness of services, 2) information needed to select a therapist, and 3) competency ratings of Psychologists and Psychiatrists for certain problems.

Rural respondents attribute to both Psychologists and Psychiatrists (87% and 91%, respectively) "ways of solving problems that friends or relatives do not" significantly more than their urban cohorts, 60.5% and 32%, for Psychologists and Psychiatrists, respectively. Both urban and rural respondents indicate a genuine need for psychiatric and psychological services, but slightly more rural residents surveyed perceive a greater need for these professionals services. This difference was significant only for the Psychiatrist group.

Analysis of questions designed to determine what information respondents needed to know before selecting a therapist revealed some rural-urban differences. In general, the urban group desired significantly more information on qualifications, including degrees, years experience, type of therapy

and success rate. For all areas of information in at least 58% of each group desired this knowledge about the therapist.

Respondents from our urban and rural sample rated the competency of Psychologists similarly when asked to assign a competency value ratings t n areas. The urban cohort perceived Psychologists as more competent than the rural group in the areas of marital problems and sexual dysfunctions. A similar but stronger difference was observed when urban and rural perceptions of Psychiatrists were compared. In the six significant content areas, where significance was noted, urban residents rated Psychiatrists as more competent, and they are as follows: depression, marital problems, sexual dysfunction, phobias, intelligence testing and personality testing.

In summary, rural respondents tended to rate both the unique skills and the need for services slightly higher than the urban sample. Rural residents generally perceived Psychologists and Psychiatrists as less competent in specific situations, than urban respondents. In addition, rural residents desired less information about a potential therapist than urban residents. Finally, the rural sample rated the Psychologists and Psychiatrists third and fifth out of six career options when ranking career choices for themselves. The rural sample also rated Psychologists higher than did the urban cohorts. It should be noted that neither profession is practiced in this rural community.

IV. Psychologist's and Psychiatrist's Knowledge of the Public Perception of Psychology and Psychiatry

Unlike most businesses, either Psychologists nor Psychiatrists attempt to survey the marketplace they serve; further, no feedback process currently exists to monitor market needs and public opinion of professional health service providers. In Oklahoma City, Oklahoma we administered the same survey to twenty-five (25) Psychiatrists and forty-seven (47) Psychologists, that was given to our urban sample. These professionals were asked to respond 'as if' they were the average Oklahoma City resident in order to assess the accuracy of their knowledge of the market they serve. The results from comparing actual respondent perceptions to Psychologists' and Psychiatrists' knowledge 1) the perceived need and helpfulness of the services, 2) perceived competency, and 3) differences in status ratings.

Psychologists and Psychiatrists both predicted that more urban residents have either had counseling or know someone who has had counseling than the residents acknowledged. Both professional groups significantly inflated the public's perception of their abilities to possess ways of solving problems that their friends and relatives do not. Although the majority of urban residents repsonded that there is a genuine need for the professional services, Psychologists and Psychiatrists predicted their services are valued higher than they actually are.

Differences in Psychologists' and Psychiatrists' knowledge of how our urban sample rated their competency in ten (10) specific areas were observed. Psychiatrists and Psychologists are both seen as competent by the public in areas such as depression, marital problems, alcohol and drug abuse. Psychologists more accurately predicted public perception of their competency with only three significant differences. In each case Psychologists expected to be rated higher than the public rated them. These arease were intelligence testing, phobias, and psychotic and schizophrenic disorders. On the other hand, Psychiatrists consistently rated themselves lower on each of the seven areas which were significantly different when compared to the urban respondents. Two of those areas, intelligence testing and career counseling, may reflect more accurate perceptions of true competenty, making the public ratings important from an educational point of view.

Both professional groups over-estimated their status relative to four (4) professions (Family Doctor, Lawyer, Dentist, and Engineer). Finallly, Psychologists were more uninformed than Psychiatrists as to the prerequisite information valued about a health service provider by urban residents before making an appointment. It appears the public is interested in the profesionals degrees, success rate, and type of therapy used more often than Psychologists realize.

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